

Sensory Processing Disorder Checklist: Signs And Symptoms Of Dysfunction

Please check all that apply

Tactile Sense: input from the skin receptors about touch, pressure, temperature, pain, and movement of the hairs on the skin.

Signs Of Tactile Dysfunction:

1. Hypersensitivity To Touch (Tactile Defensiveness)

- _____ Becomes fearful, anxious or aggressive with light or unexpected touch
- _____ As an infant, did/does not like to be held or cuddled; may arch back, cry, and pull away
- _____ Distressed when diaper is being, or needs to be, changed
- _____ Appears fearful of, or avoids standing in close proximity to other people or peers (especially in lines)
- _____ Becomes frightened when touched from behind or by someone/something they can not see (such as under a blanket)
- _____ Complains about having hair brushed; may be very picky about using a particular brush
- _____ Bothered by rough bed sheets (i.e., if old and "bumpy")
- _____ Avoids group situations for fear of the unexpected touch
- _____ Resists friendly or affectionate touch from anyone besides parents or siblings (and sometimes them too!)
- _____ Dislikes kisses, will "wipe off" place where kissed
- _____ Prefers hugs
- _____ A raindrop, water from the shower, or wind blowing on the skin may feel like torture and produce adverse and avoidance reactions
- _____ May overreact to minor cuts, scrapes, and or bug bites
- _____ Avoids touching certain textures of material (blankets, rugs, stuffed animals)
- _____ Refuses to wear new or stiff clothes, clothes with rough textures, turtlenecks, jeans, hats, or belts, etc.
- _____ Avoids using hands for play
- _____ Avoids/dislikes/aversive to "messy play", i.e., sand, mud, water, glue, glitter, play dough, slime, shaving cream/funny foam etc.
- _____ Will be distressed by dirty hands and want to wipe or wash them frequently
- _____ Excessively ticklish
- _____ Distressed by seams in socks and may refuse to wear them
- _____ Distressed by clothes rubbing on skin; may want to wear shorts and short sleeves year round, toddlers may prefer to be naked and pull diapers and clothes off constantly
- _____ Or, may want to wear long sleeve shirts and long pants year round to avoid having skin exposed
- _____ Distressed about having face washed
- _____ Distressed about having hair, toenails, or fingernails cut
- _____ Is a picky eater, only eating certain tastes and textures; mixed textures tend to be avoided as well as hot or cold foods; resists trying new foods
- _____ May refuse to walk barefoot on grass or sand
- _____ May walk on toes only

2. Hyposensitivity To Touch (Under-Responsive):

- _____ May crave touch, needs to touch everything and everyone
- _____ Is not aware of being touched/bumped unless done with extreme force or intensity
- _____ Is not bothered by injuries, like cuts and bruises, and shows no distress with shots (May even say they love getting shots!)
- _____ May not be aware that hands or face are dirty or feel his/her nose running
- _____ May be self-abusive; pinching, biting, or banging his own head
- _____ Mouths objects excessively

Frequently hurts other children or pets while playing
Repeatedly touches surfaces or objects that are soothing (i.e., blanket)
Seeks out surfaces and textures that provide strong tactile feedback
Thoroughly enjoys and seeks out messy play
Craves vibrating or strong sensory input
Has a preference and craving for excessively spicy, sweet, sour, or salty foods

3. Poor Tactile Perception And Discrimination:

Has difficulty with fine motor tasks such as buttoning, zipping, and fastening clothes
May not be able to identify which part of their body was touched if they were not looking
May be afraid of the dark
May be a messy dresser; looks disheveled, does not notice pants are twisted, shirt is half un tucked, Shoes are untied, one pant leg is up and one is down, etc.
Has difficulty using scissors, crayons, or silverware
Continues to mouth objects to explore them even after age two
Has difficulty figuring out physical characteristics of objects; shape, size, texture, temperature, weight, etc.
May not be able to identify objects by feel, uses vision to help; such as, reaching into backpack Or desk to retrieve an item

Vestibular Sense: input from the inner ear about equilibrium, gravitational changes, movement experiences, and position in space.

Signs Of Vestibular Dysfunction:

1. Hypersensitivity To Movement (Over-Responsive):

Avoids/dislikes playground equipment; i.e., swings, ladders, slides, or merry-go-rounds
Prefers sedentary tasks, moves slowly and cautiously, avoids taking risks, and may appear "wimpy"
Avoids/dislikes elevators and escalators; may prefer sitting while they are on them or, actually get motion sickness from them
May physically cling to an adult they trust
May appear terrified of falling even when there is no real risk of it
Afraid of heights, even the height of a curb or step
Fearful of feet leaving the ground
Fearful of going up or down stairs or walking on uneven surfaces
Afraid of being tipped upside down, sideways or backwards; will strongly resist getting hair washed over the sink
Startles if someone else moves them; i.e., pushing his/her chair closer to the table
As an infant, may never have liked baby swings or jumpers
May be fearful of, and have difficulty riding a bike, jumping, hopping, or balancing on one foot (Especially if eyes are closed)
May have disliked being placed on stomach as an infant
Loses balance easily and may appear clumsy
Fearful of activities which require good balance
Avoids rapid or rotating movements

2. Hyposensitivity To Movement (Under-Responsive):

In constant motion, can't seem to sit still
Craves fast, spinning, and/or intense movement experiences
Loves being tossed in the air
Could spin for hours and never appear to be dizzy
Loves the fast, intense, and/or scary rides at amusement parks

	Always jumping on furniture, trampolines, spinning in a swivel chair, or getting into upside down positions
	Loves to swing as high as possible and for long periods of time
	Is a "thrill-seeker"; dangerous at times
	Always running, jumping, hopping etc. instead of walking
	Rocks body, shakes leg, or head while sitting
	Likes sudden or quick movements, such as, going over a big bump in the car or on a bike

3. Poor Muscle Tone And/Or Coordination:

	Has a limp, "floppy" body
	Frequently slumps, lies down, and/or leans head on hand or arm while working at his/her desk
	Difficulty simultaneously lifting head, arms, and legs off the floor while lying on stomach ("superman" position)
	Often sits in a "W sit" position on the floor to stabilize body
	Fatigues easily!
	Compensates for "looseness" by grasping objects tightly
	Difficulty turning doorknobs, handles, opening and closing items
	Difficulty catching him/her self if falling
	Difficulty getting dressed and doing fasteners, zippers, and buttons
	May have never crawled as a baby
	Has poor body awareness; bumps into things, knocks things over, trips, and/or appears clumsy
	Poor gross motor skills; jumping, catching a ball, jumping jacks, climbing a ladder etc.
	Poor fine motor skills; difficulty using "tools", such as pencils, silverware, combs, scissors etc.
	May appear ambidextrous, frequently switching hands for coloring, cutting, writing etc.;
	does not have an established hand preference/dominance by 4 or 5 years old
	Has difficulty licking an ice cream cone
	Seems to be unsure about how to move body during movement, for example, stepping over something
	Difficulty learning exercise or dance steps

Proprioceptive Sense: input from the muscles and joints about body position, weight, pressure, stretch, movement, and changes in position in space.

Signs Of Proprioceptive Dysfunction:

1. Sensory Seeking Behaviors:

	Seeks out jumping, bumping, and crashing activities
	Stomps feet when walking
	Kicks his/her feet on floor or chair while sitting at desk/table
	Bites or sucks on fingers and/or frequently cracks his/her knuckles
	Loves to be tightly wrapped in many or weighted blankets, especially at bedtime
	Prefers clothes (and belts, hoods, shoelaces) to be as tight as possible
	Loves/seekes out "squishing" activities
	Enjoys bear hugs
	Excessive banging on/with toys and objects
	Loves "roughhousing" and tackling/wrestling games
	Frequently falls on floor intentionally
	Would jump on a trampoline for hours on end
	Grinds his/her teeth throughout the day

	Loves pushing/pulling/dragging objects
	Loves jumping off furniture or from high places
	Frequently hits, bumps or pushes other children
	Chews on pens, straws, shirt sleeves etc.

2. Difficulty With "Grading Of Movement":

	Misjudges how much to flex and extend muscles during tasks/activities (i.e., putting arms into sleeves or climbing)
	Difficulty regulating pressure when writing/drawing; may be too light to see or so hard the tip of writing utensil breaks
	Written work is messy and he/she often rips the paper when erasing
	always seems to be breaking objects and toys
	Misjudges the weight of an object, such as a glass of juice, picking it up with too much force sending it flying or spilling, or with too little force and complaining about objects being too heavy
	May not understand the idea of "heavy" or "light"; would not be able to hold two objects and tell you which weighs more
	Seems to do everything with too much force; i.e., walking, slamming doors, pressing things too hard, slamming objects down
	Plays with animals with too much force, often hurting them

Signs Of Auditory Dysfunction: (no diagnosed hearing problem)

1. Hypersensitivity To Sounds (Auditory Defensiveness):

	Distracted by sounds not normally noticed by others; i.e., humming of lights or refrigerators, fans, heaters, or clocks ticking
	Fearful of the sound of a flushing toilet (especially in public bathrooms), vacuum, hairdryer, squeaky shoes, or a dog barking
	Startled with or distracted by loud or unexpected sounds
	Bothered/distracted by background environmental sounds; i.e., lawn mowing or outside construction
	Frequently asks people to be quiet; i.e., stop making noise, talking, or singing
	Runs away, cries, and/or covers ears with loud or unexpected sounds
	May refuse to go to movie theaters, parades, skating rinks, musical concerts etc.
	May decide whether they like certain people by the sound of their voice

2. Hyposensitivity To Sounds (Under-Registers):

	Often does not respond to verbal cues or to name being called
	Appears to "make noise for noise's sake"
	Loves excessively loud music or TV
	Seems to have difficulty understanding or remembering what was said
	Appears oblivious to certain sounds
	Appears confused about where a sound is coming from
	Talks self through a task, often out loud
	Had little or no vocalizing or babbling as an infant
	Needs directions repeated often, or will say, "What?" frequently

Signs Of Oral Input Dysfunction:

1. Hypersensitivity To Oral Input (Oral Defensiveness):

	Picky eater, often with extreme food preferences; i.e., limited repertoire of foods, picky about brands, resistive to trying new foods or restaurants, and may not eat at other people's houses)
	May only eat "soft" or pureed foods past 24 months of age
	May gag with textured foods

	Has difficulty with sucking, chewing, and swallowing; may choke or have a fear of choking
	Resists/refuses/extremely fearful of going to the dentist or having dental work done
	May only eat hot or cold foods
	Refuses to lick envelopes, stamps, or stickers because of their taste
	Dislikes or complains about toothpaste and mouthwash
	Avoids seasoned, spicy, sweet, sour or salty foods; prefers bland foods

2. Hyposensitivity To Oral Input (Under-Registers)

	May lick, taste, or chew on inedible objects
	Prefers foods with intense flavor; i.e., excessively spicy, sweet, sour, or salty
	Excessive drooling past the teething stage
	Frequently chews on hair, shirt, or fingers
	Constantly putting objects in mouth past the toddler years
	Acts as if all foods taste the same
	Can never get enough condiments or seasonings on his/her food
	Loves vibrating toothbrushes and even trips to the dentist

Signs Of Olfactory Dysfunction (Smells):

1. Hypersensitivity To Smells (Over-Responsive):

	Reacts negatively to, or dislikes smells which do not usually bother, or get noticed, by other people
	Tells other people (or talks about) how bad or funny they smell
	Refuses to eat certain foods because of their smell
	Offended and/or nauseated by bathroom odors or personal hygiene smells
	Bothered/irritated by smell of perfume or cologne
	Bothered by household or cooking smells
	May refuse to play at someone's house because of the way it smells
	Decides whether he/she likes someone or some place by the way it smells

2. Hyposensitivity To Smells (Under-Responsive):

	Has difficulty discriminating unpleasant odors
	May drink or eat things that are poisonous because they do not notice the noxious smell
	Unable to identify smells from scratch 'n sniff stickers
	Does not notice odors that others usually complain about
	Fails to notice or ignores unpleasant odors
	Makes excessive use of smelling when introduced to objects, people, or places
	Uses smell to interact with objects

Signs Of Visual Input Dysfunction (No Diagnosed Visual Deficit):

1. Hypersensitivity To Visual Input (Over-Responsiveness)

	Sensitive to bright lights; will squint, cover eyes, cry and/or get headaches from the light
	Has difficulty keeping eyes focused on task/activity he/she is working on for an appropriate amount of time
	Easily distracted by other visual stimuli in the room; i.e., movement, decorations, toys, windows, doorways etc.
	Has difficulty in bright colorful rooms or a dimly lit room
	Rubs his/her eyes, has watery eyes or gets headaches after reading or watching TV
	Avoids eye contact

	Enjoys playing in the dark
2. Hyposensitivity To Visual Input (Under-Responsive Or Difficulty With Tracking, Discrimination, Or Perception):	
	Has difficulty telling the difference between similar printed letters or figures; i.e., p & q, b & d, + and x, or square and rectangle
	Has a hard time seeing the "big picture"; i.e., focuses on the details or patterns within the picture
	Has difficulty locating items among other items; i.e., papers on a desk, clothes in a drawer, items on a grocery shelf, or toys in a bin/toy box
	Often loses place when copying from a book or the chalkboard
	Difficulty controlling eye movement to track and follow moving objects
	Has difficulty telling the difference between different colors, shapes, and sizes
	Often loses his/her place while reading or doing math problems
	Makes reversals in words or letters when copying, or reads words backwards; i.e., "was" for "saw" and "no" for "on" after first grade
	Complains about "seeing double"
	Difficulty finding differences in pictures, words, symbols, or objects
	Difficulty with jigsaw puzzles, copying shapes, and/or cutting/tracing along a line
	Tends to write at a slant (up or down hill) on a page
	Confuses left and right
	Fatigues easily with schoolwork
	Difficulty judging spatial relationships in the environment; i.e., bumps into objects/people or missteps on curbs and stairs
Social, Emotional, Play, And Self-Regulation Dysfunction:	
Social:	
	Difficulty getting along with peers
	Prefers playing by self with objects or toys rather than with people
	Does not interact reciprocally with peers or adults; hard to have a "meaningful" two-way conversation
	Self-abusive or abusive to others
	Others have a hard time interpreting child's cues, needs, or emotions
	Does not seek out connections with familiar people
Emotional:	
	Difficulty accepting changes in routine (to the point of tantrums)
	Gets easily frustrated
	Often impulsive
	Functions best in small group or individually
	Variable and quickly changing moods; prone to outbursts and tantrums
	Prefers to play on the outside, away from groups, or just be an observer
	Avoids eye contact
	Difficulty appropriately making needs known
	Difficulty with imitative play (over 10 months)
	Wanders aimlessly without purposeful play or exploration (over 15 months)
	Needs adult guidance to play, difficulty playing independently (over 18 months)
	Participates in repetitive play for hours; i.e., lining up toys cars, blocks, watching one movie over and over etc.

Self-Regulation:

Excessive irritability, fussiness or colic as an infant

Can't calm or soothe self through pacifier, comfort object, or caregiver

Can't go from sleeping to awake without distress

Requires excessive help from caregiver to fall asleep; i.e., rubbing back or head, rocking, long walks, or car rides

Internal Regulation (The Interoceptive Sense):

Becoming too hot or too cold sooner than others in the same environments; may not appear to ever get cold/hot, may not be able to maintain body temperature effectively

Difficulty in extreme temperatures or going from one extreme to another (i.e., winter, summer, going from air conditioning to outside heat, a heated house to the cold outside)

Respiration that is too fast, too slow, or cannot switch from one to the other easily as the body demands an appropriate respiratory response

Heart rate that speeds up or slows down too fast or too slow based on the demands imposed on it

Respiration and heart rate that takes longer than what is expected to slow down during or after exertion or fear

Severe/several mood swings throughout the day (angry to happy in short periods of time, perhaps without visible cause)

Unpredictable state of arousal or inability to control arousal level (hyper to lethargic, quickly, vacillating between the two; over stimulated to under stimulated, within hours or days, depending on activity and setting, etc.)

Frequent constipation or diarrhea, or mixed during the same day or over a few days

Difficulty with potty training; does not seem to know when he/she has to go (i.e., cannot feel the necessary sensation that bowel or bladder are full)

Unable to regulate thirst; always thirsty, never thirsty, or oscillates back and forth

Unable to regulate hunger; eats all the time, won't eat at all, unable to feel full/hungry

Unable to regulate appetite; has little to no appetite and/or will be "starving" one minute then full two bites later, then back to hungry again (prone to eating disorders and/or failure to thrive)

Sensory Diet Activities for Children

Touch/Deep Pressure

Swaddle
Bear hugs
Backscratch
Massage with/without lotion
Joint compressions
Therapy brushing
Warm bath
Scrub with washcloth/scrubby
Water play
Wear certain fabrics
Explore various textures
Sit in the sunshine/shade
Jump on "crash pad"
Log rolling
Use hand fidgets
Play with stuffed toys
Make mudpies
Use fingerpaint or other paints
Use glitter glue

Arts & crafts
Use foamy soap/shaving cream
Play with whipped cream
Pet a dog, cat, or other animal
Mix cookie dough, cake batter
Weighted blanket, vest, lap pad
Roll up in a "burrito" blanket
"Sandwich" between pillows
Climb under sofa cushions
Play in sandbox
Use Play-doh, Gak, Floam,
Sculpey, Silly Putty, clay
Sensory bin with dry rice &
beans or other materials
Help with gardening
Vibrating toys - pens, balls,
stuffed toys
Use vibrating toothbrush
Vibramat/Tender Vibes mattress

Others:

Note: Never force a child to touch something he finds "gross." Let him use a paintbrush, stick, gloves, or even a toy for cautious exploration. The mouth is also lined with skin - see "oral comforts."

Movement/Proprioception

Rocking (in your arms, hobby horse, or rocking chair)
Playing horsie on your knee
Crawling on hands and knees
Commando crawling with full body
Walk
Run
Jump
March
Dance
Bunny hop
Wheelbarrow walk
Animal walks
Jumping jacks
Floor push ups
Wall push ups
Sit ups
Use swings
Playground slides
Use monkey bars
Climb stairs

Climb ladders
Jump on mini-trampoline
Use Sit n' Spin, Dizzy Disc Jr.,
or other spinning toy
Hop-It balls
Inflatable seat cushions
Bounce on a therapy ball
Ride a tricycle/bicycle
Ride a scooter/skateboard
Amusement park rides
Swimming
Push a grocery cart or stroller
Brain Gym and yoga exercises
Roll down a hill
Hokey Pokey
Play catch
Balloon tennis
Play hopscotch
Cartwheels and somersaults
Ice skating/sledding/skiing
Pogo Stick/Bungee Jumper

Others:

Notes: Generally, rhythmic movement is calming while erratic movement is arousing. Never force movement. Look out for physiological responses such as increased distractibility, disorientation, nausea, breathing changes, unexpected tiredness, suddenly pale or flushed skin.

More Sensory Diet Activities for Children

Listening/Auditory

Listen to favorite music
Discover calming vs. arousing music
Bang on pots and pans
Play musical instruments
Listen to sounds of nature outdoors
Singing
Humming
Whispering
Blow whistles
Therapeutic Listening programs
Sound Eaze/School Eaze CDs
White noise machine or CD

Observe silence
Identify and label sounds
Use earplugs or sound-canceling headphones
Explore the stereo volume control knob
"Safe space" with quiet and low light

Others:

Looking/Vision

Look at mobiles, lava lamps, bubble lamps
Colored lightbulbs
Avoid fluorescent bulbs (visual flicker, noise, and mercury content in compact fluorescents)
"Safe space" with minimal visuals
Respect color preference in clothing, objects, and interior decorating
Reconsider complicated prints and patterns on clothing, walls, and floors
Toys in opaque containers
Leave out 5-10 toys at a time to avoid visual overload
Look at photos
Look at picture books
Look at nature - fish tanks, farm, zoo, ocean

Watch cartoons and movies
High-quality sunglasses outdoors
Tinted lenses indoors if sensitive to glare
Wide brim hat or visor outdoors
Games and activities that develop visual skills- mazes, dot-to-dots, I Spy, drawing, flashlight tag, etc.

Others:

Smell/Taste/Oral Comforts

Essential oils and scented candles
Explore personal preference and discover invigorating (typically lemon and peppermint) vs. calming (typically vanilla, rose, and sweet orange)
Smell flowers
Sniff spices and herbs
Blindfold smelling game
Explore tastes: sweet, salty, sour, spicy, bitter
Eat frozen/cool/warm foods
Explore textures: crunchy, creamy, chewy, lumpy
Chew gum/suck on lollipop
Blow bubbles
Suck thick liquid through straw
Use age appropriate "chewy"

Others:

Note: Avoid lavender and tea tree oil as studies show they may cause hormonal imbalances in young boys.